FORM D

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UNITED STATES SECURITIES AND EXCHANGE CONTROL Washington, D.C. 20549 Section

FORM D SEP 02 2008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATED SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPRO	OVAL
OMB Number:	3235-0076
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Name of Official And in the is an annualment and name has abanced and indicate change.	
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Enhance Skin Products Inc Units	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	□ nroe
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08059321
Enhance Skin Products Inc.	-
Address of Executive Offices (Number and Street, City. State. Zip Code)	Telephone Number (Including Area Code)
695 South Colorado Boulevard, Suite 480, Denver, CO 80246	416-644-8318
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
The issuer is a developer of premium cosmeceutical products marketed under its "Visible Yo	outh™" trademark.
Type of Business Organization Corporation Imited partnership, already formed business trust Imited partnership, to be formed	lease specify):
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: 11 06 Actual Estim Listing CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
• Each promoter of the issuer, if the issuer has been organized within the past five years:	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of	a class of equity securities of the issuer.
• Each executive officer and director of corporate issuers and of corporate general and managing partners of p	partnership issuers; and
• Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Asculai, Ph.D., Samuel	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Enhance Skin Products Inc., 695 South Colorado Boulevard, Suite 480, Denver, CO 80246	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) Hovey, Christopher	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Enhance Skin Products Inc., 695 South Colorado Boulevard, Suite 480, Denver, CO 80246	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) Gugol, Joel M.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Enhance Skin Products Inc., 695 South Colorado Boulevard, Suite 480, Denver, CO 80246	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Mercado, Erickson D.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Enhance Skin Products Inc., 695 South Colorado Boulevard, Suite 480, Denver, CO 80246	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

					B. 13	NFORMATI	ON ABOU	T OFFERI	NG				
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes	No x	
	Answer also in Appendix, Column 2, if filing under ULOE.											_	_
2.	2. What is the minimum investment that will be accepted from any individual?											\$0.0	0
												Yes	No
3.											ĸ		
4.	commis If a pers or states	sion or sim son to be lis s, list the na	ilar request ilar remune ited is an ass ame of the b you may so	ration for s sociated pe broker or do	solicitation rson or age caler. If mo	of purchase nt of a brok ore than five	ers in conne er or deale e (5) persor	ection with r registered ns to be list	sales of sec I with the S ed are asso	curities in t EC and/or	he offering. with a state		
Ful	ll Name (Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (N	lumber and	l Street. Ci	ty. State. Z	ip Code)						
Na	me of Ass	sociated Bi	roker or De	aler		***							
Sta	tes in Wl	nich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)		***************************************						l States
	AL	[AK]	AZ	AR	CA	CO	CT	DE	[DC]	FL	GA	HI	ID
	IL		IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC NC	ND	OH	OK)	OR	PA
	RI	SC	SD	TN	TX	UT	VT	[VA]	WA	WV	W _I	WY	PR
Ful	ll Name (Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (?	Number an	d Street, C	ity. State.	Zin Code)					 	
_							,						
Na	me of As:	sociated Bi	roker or De	aler									
Sta	tes in Wh	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers					<u> </u>	
	(Check	"All State:	s" or check	individual	States)		**************			******		☐ Al	I States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GΛ	111	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT	NE	NV	NH	ИJ	NM	NY	[NC]	ND	OH	OK.	OR	PA
	RI	SC	SD	TN	TX	UT	VT]	VA	[WA]	WV	WI	WY.	PR
Ful	l Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (?	Number an	d Street, C	ity, State, 2	Zip Code)					···-	
No	ma of Ag	registed Dr	roker or De	olan.		· · ·							
Na	me or As:	sociated Bi	roker or De	aier									
Sta	tes in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers				· · · · · ·		
	(Check	"All States	s" or check	individual	States)		,	,,	·····			☐ Al	1 States
	AL	ĀK	[AZ]	AR	CA	<u>[CO]</u>	CT	DE	DC	FL	<u>G</u> A	HI	ID
	IL	IN	IA	KS	KY	LA	ME	$\overline{\mathrm{MD}}$	MA	ML	MN	MS	MO
	MT	NE	NV	NH	[K]	NM	NY	NC	ND	ОН	OK	OR	PA

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

l.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \Box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	\$
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)	\$	S
	Partnership Interests		\$
	Other (Specify) Units consisting of 2 shares of common stock and a warrant to purchase		s 1,500,000.00
	1 share of common stock Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggrapata
		Number Investors	Aggregate Dollar Amount of Purchases 5 1,500,000.00
	Accredited Investors		<u> </u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix. Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		s
	Regulation A		s
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$2,000.00
	Printing and Engraving Costs		\$
	Legal Fees		\$ 42,600.00
	Accounting Fees	_	\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify) Finder's fee	_	\$ 300,000.00
	Total		\$ 344,600.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS									
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$1,155,400.00						
5.	Indicate below the amount of the adjusted gross pre each of the purposes shown. If the amount for ar check the box to the left of the estimate. The total o proceeds to the issuer set forth in response to Part	ny purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross								
			Payments to Officers, Directors, & Affiliates	Payments to Others						
	Salaries and fees	[. 🗆 \$						
	Purchase of real estate	[. 🗆 \$						
	Purchase, rental or leasing and installation of made and equipment	chinery [_]\$. []\$						
	Construction or leasing of plant buildings and fac	ilities[\$	\$						
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	¬\$	□\$						
	Repayment of indebtedness									
	Working capital									
	Other (specify):									
			\$. 🗆 \$						
	Column Totals		\$ 59,482.00	\$_1,095,918.00						
	Total Payments Listed (column totals added)		_ ∠ \$ <u>_1</u> ,	155,400.00						
		D. FEDERAL SIGNATURE								
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commis	sion, upon writte							
lss	uer (Print or Type)	Signature	Date							
	nhance Skin Products Inc.	19 Fell	Aug. 27.	2008						
Na	me of Signer (Print or Type)	Title of Signor (Print or Type)								
Sa	muel Asculai, Ph.D.	President and Chief Executive Officer								

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is f D (17 CFR 239.500) at such times as required by state law.	iled a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees.	ion furn	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entimited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer clai of this exemption has the burden of establishing that these conditions have been satisfied.		
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beha thorized person.	lf by the	undersigned
,	Print or Type) Signature Pe Skin Products Inc. Date Acc 27.	200	8
Name (Print or Type) Title (Vrint/or Type)		

President and Chief Executive Officer

Instruction:

Samuel Asculai, Ph.D.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 4 1 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate explanation of offering price Type of investor and to non-accredited amount purchased in State waiver granted) offered in state investors in State (Part E-Item 1) (Part C-Item 2) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited No Yes Investors Amount Investors Amount State Yes No ALΑK ΑZ AR $\mathsf{C}\mathsf{A}$ CO CT DE DC FL GA н ID IL IN IΑ KS ΚY LA ME MD MA ΜI MN MS

APPENDIX 4 ı 2 3 Disqualification under State ULOE Type of security and aggregate (if yes, attach Intend to sell offering price Type of investor and explanation of to non-accredited amount purchased in State waiver granted) offered in state investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited Yes No State Yes No Investors Amount Investors Amount MO MT NE NV NH NJ NM NY NC ND ОН OK OR PA RI SC SD TN ΤX UT VTVA WA WV WI

				APP	ENDIX	- 101			
1		2	3 Type of security			4			lification ate ULOE
	to non-a	to sell accredited as in State s-Item 1)	and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY PR									

